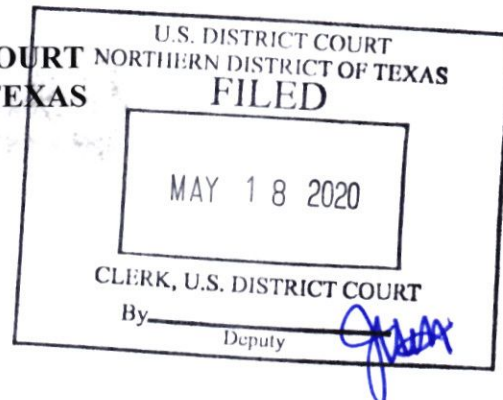


IN THE UNITED STATES DISTRICT COURT
FOR THE NORTHERN DISTRICT OF TEXAS



AMENDED FORM

Bradley Wayne Minchey #126071553
Plaintiff's Name and ID Number

Johnson County Jail
Place of Confinement

CASE NO. 3:20-CV-1110-G
(Clerk will assign the number)

v.

Johnson County Correctional Center
Defendant's Name and Address

1800 Ridgeman Dr Cleburne TX 76033
Defendant's Name and Address

Defendant's Name and Address
(DO NOT USE "ET AL.")

INSTRUCTIONS - READ CAREFULLY

NOTICE:

Your complaint is subject to dismissal unless it conforms to these instructions and this form.

1. To start an action you must file an original and one copy of your complaint with the court. You should keep a copy of the complaint for your own records.
2. Your complaint must be legibly handwritten, in ink, or typewritten. You, the plaintiff, must sign and declare under penalty of perjury that the facts are correct. If you need additional space, **DO NOT USE THE REVERSE SIDE OR BACK SIDE OF ANY PAGE.** ATTACH AN ADDITIONAL BLANK PAGE AND WRITE ON IT.
3. You must file a separate complaint for each claim you have unless the various claims are all related to the same incident or issue or are all against the same defendant, Rule 18, Federal Rules of Civil Procedure. Make a short and plain statement of your claim, Rule 8, Federal Rules of Civil Procedure.
4. When these forms are completed, mail the original and one copy to the clerk of the United States district court for the appropriate district of Texas in the division where one or more named defendants are located, or where the incident giving rise to your claim for relief occurred. If you are confined in the Texas Department of Criminal Justice, Correctional Institutions Division (TDCJ-CID), the list labeled as "VENUE LIST" is posted in your unit law library. It is a list of the Texas prison units indicating the appropriate district court, the division and an address list of the divisional clerks.

FILING FEE AND IN FORMA PAUPERIS (IFP)

1. In order for your complaint to be filed, it must be accompanied by the statutory filing fee of \$350.00 plus an administrative fee of \$50.00 for a total fee of **\$400.00**.
2. If you do not have the necessary funds to pay the fee in full at this time, you may request permission to proceed *in forma pauperis*. In this event you must complete the application to proceed *in forma pauperis*, setting forth information to establish your **inability** to prepay the fees and costs or give security therefor. You must also include a current six-month history of your inmate trust account. If you are an inmate in TDCJ-CID, you can acquire the application to proceed *in forma pauperis* and the certificate of inmate trust account, also known as *in forma pauperis* data sheet, from the law library at your prison unit.
3. The Prison Litigation Reform Act of 1995 (PLRA) provides "... if a prisoner brings a civil action or files an appeal *in forma pauperis*, the prisoner shall be required to pay the full amount of a filing fee." See 28 U.S.C. § 1915. Thus, the court is required to assess and, when funds exist, collect, the entire filing fee or an initial partial filing fee and monthly installments until the entire amount of the filing fee has been paid by the prisoner. If you submit the application to proceed *in forma pauperis*, the court will apply 28 U.S.C. § 1915 and, if appropriate, assess and collect the entire filing fee or an initial partial filing fee, then monthly installments from your inmate trust account, until the entire \$350.00 statutory filing fee has been paid. (The \$50.00 administrative fee does not apply to cases **proceeding in forma pauperis**.)
4. If you intend to **seek in forma pauperis** status, do not send your complaint without an application to proceed *in forma pauperis* and the certificate of inmate trust account. Complete all essential paperwork before submitting it to the court.

CHANGE OF ADDRESS

It is your responsibility to inform the court of any change of address and its effective date. Such notice should be marked "**NOTICE TO THE COURT OF CHANGE OF ADDRESS**" and shall not include any motion for any other relief. Failure to file a NOTICE TO THE COURT OF CHANGE OF ADDRESS may result in the dismissal of your complaint pursuant to Rule 41(b), Federal Rules of Civil Procedure.

I. PREVIOUS LAWSUITS:

A. Have you filed *any* other lawsuit in state or federal court relating to your imprisonment? ☒ YES ☐ NO

B. If your answer to "A" is "yes," describe each lawsuit in the space below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, giving the same information.)

1. Approximate date of filing lawsuit: 4/28/20
2. Parties to previous lawsuit:
 Plaintiff(s) Bradley Wayne Minchey
 Defendant(s) LaSalle Southwest corrections
3. Court: (If federal, name the district; if state, name the county.) Northern District of Texas (Dallas)
4. Cause number: 3:20-CV-01066-E-BN
5. Name of judge to whom case was assigned: David L. Horan
6. Disposition: (Was the case dismissed, appealed, still pending?) Still pending
7. Approximate date of disposition: N/A

II. PLACE OF PRESENT CONFINEMENT: Johnson County Jail (JCCC)

III. EXHAUSTION OF GRIEVANCE PROCEDURES:

Have you exhausted all steps of the institutional grievance procedure? YES ☒ NO

Attach a copy of your final step of the grievance procedure with the response supplied by the institution.

After being looked into and after Lawsuit was filed the problem was fixed. But they still knowingly let it happen for months until suit was filed on them.

IV. PARTIES TO THIS SUIT:

A. Name and address of plaintiff: Bradley WAYNE Minchey #126071553
Johnson county jail 1800 Ridgeman Dr Cleburne TX 76033.

B. Full name of each defendant, his official position, his place of employment, and his full mailing address.

Defendant #1: Johnson county correctional center - 1800 Ridgeman Dr
Cleburne TX 76033

Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.

Placed me in segregation cell for 3 weeks where the cellblock light switch did not work and did not turn off or dim lights for Entire time. The cell lights were very bright 24/7.

Defendant #2:

N/A

Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.

N/A

Defendant #3: N/A

Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.

N/A

Defendant #4: N/A

Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.

N/A

Defendant #5: N/A

Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.

N/A

V. STATEMENT OF CLAIM:

State here in a short and plain statement the facts of your case, that is, what happened, where did it happen, when did it happen, and who was involved. Describe how each defendant is involved. You need not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach extra pages if necessary, but remember the complaint must be stated briefly and concisely. IF YOU VIOLATE THIS RULE, THE COURT MAY STRIKE YOUR COMPLAINT.

I Bradley Wayne Minchey was placed in a segregation cell at the Johnson County Correctional Center on April 13th 2020. For Two and a half weeks I was forced to stay in a cell where the lights never turned off or dimmed down at all. I asked the officers everyday and night if they could please turn the lights down or off. The answer I got everytime was, there is not a switch for us to turn the lights down or off they never installed one when they added this section to the jail. Therefore it has been knowingly and intentional for the officers here to place inmates in these Faulty and unsuitable cells on cell block Brown for months and months since the cellblock was built. Which is cruel and unusual punishment and a serious strain on mental state. Cell #20 on cell Block Brown.

VI. RELIEF:

State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.

Ask that Johnson county correctional center pay me Bradley Minchey: 30,000\$ for pain and suffering, 30,000\$ for Mental Rehabilitation and 40,000\$ for Doctors and psychiatrist bills.

VII. GENERAL BACKGROUND INFORMATION:

A. State, in complete form, all names you have ever used or been known by including any and all aliases.

Bradley Wayne Minchey

B. List all TDCJ-CID identification numbers you have ever been assigned and all other state or federal prison or FBI numbers ever assigned to you.

2067586, 1886562, 2109180, 12607586

VIII. SANCTIONS:

A. Have you been sanctioned by any court as a result of any lawsuit you have filed? YES NO

B. If your answer is "yes," give the following information for every lawsuit in which sanctions were imposed. (If more than one, use another piece of paper and answer the same questions.)

1. Court that imposed sanctions (if federal, give the district and division): N/A

2. Case number: N/A

3. Approximate date sanctions were imposed: N/A

4. Have the sanctions been lifted or otherwise satisfied? YES NO

- C. Has any court ever warned or notified you that sanctions could be imposed? _____ YES ☒ NO
- D. If your answer is "yes," give the following information for every lawsuit in which a warning was issued. (If more than one, use another piece of paper and answer the same questions.)
1. Court that issued warning (if federal, give the district and division): N/A
 2. Case number: N/A
 3. Approximate date warning was issued: N/A

Executed on: 5-9-20
DATE

Bradley Wayne Minchey #126071553
Bradley Minchey
(Signature of Plaintiff)

PLAINTIFF'S DECLARATIONS


1. I declare under penalty of perjury all facts presented in this complaint and attachments thereto are true and correct.
2. I understand, if I am released or transferred, it is my responsibility to keep the court informed of my current mailing address and failure to do so may result in the dismissal of this lawsuit.
3. I understand I must exhaust all available administrative remedies prior to filing this lawsuit.
4. I understand I am prohibited from bringing an *in forma pauperis* lawsuit if I have brought three or more civil actions or appeals (from a judgment in a civil action) in a court of the United States while incarcerated or detained in any facility, which lawsuits were dismissed on the ground they were frivolous, malicious, or failed to state a claim upon which relief may be granted, unless I am under imminent danger of serious physical injury.
5. I understand even if I am allowed to proceed without prepayment of costs, I am responsible for the entire filing fee and costs assessed by the court, which shall be deducted in accordance with the law from my inmate trust account by my custodian until the filing fee is paid.

Signed this 9th day of May, 20 20.
(Day) (month) (year)

Bradley Wayne Minchey #126071553
Bradley Minchey
(Signature of Plaintiff)

WARNING: Plaintiff is advised any false or deliberately misleading information provided in response to the above questions may result in the imposition of sanctions. The sanctions the court may impose include, but are not limited to, monetary sanctions and the dismissal of this action with prejudice.

Copy

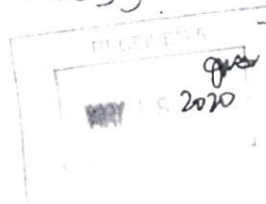
	Inmate / Resident Grievance Form	Step 1	Facility JCCC
Instructions: Inmate/Resident: Attempt informal resolution with a staff supervisor. If you feel that the issue is not resolved, complete the form with the information requested. If what you describe is not grievable or unreadable, the form will be returned to you without action. If this is an emergency immediately contact a staff member. (An emergency is defined as an immediate threat to your welfare or safety.)		Grievance Number: (Grievance Coordinator will assign number) <div style="font-size: 1.5em; font-family: cursive;">J042020-915-</div>	
Inmate/Resident Name:		Inmate/Resident Number	Housing Location:
Bradley Minchey		126071553	Br-20
Describe the nature or description of problem. Print or write legibly. Include date, time and names of persons involved or witnessing the incident. If you need more space, continue on the reverse side of this form. Be concise as possible.			
I was placed in Brown segregation cell 20 on the 13 th of April 2020. The whole time I have been here in this cell the lights have never been turned down or dimmed or turned off. I feel like I have been placed in this cell and have been undergoing cruel and unusual punishment. I never get any sleep. I never know when if it is day or night and I never know if another day has passed or not. It is seriously bothering me and affecting my mental stability.			
Date/Time Submitted:		Inmate/Resident Name:	Emergency:
April 24 th 2020 12:45		Bradley Minchey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Inmate/Residents will not write below this line			
Date/Time Received:		Grievance Coordinator name:	Emergency:
4-27-20 1510		<i>[Signature]</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Disposition of grievance			
Your grievance has been carefully reviewed and the following response is submitted:			
This will be looked into.			
Date of Response:		Responding Staff Members Name:	
4-28-20		<i>[Signature]</i>	
Inmate/Resident will circle a response below		Date	
I hereby <u>ACCEPT</u> REFUSE resolution offered.		4:00 4-29-20	
Date/Time Completed/Resolved		Printed Name	Signature
4-29-20 1510		MOORE	<i>[Signature]</i>
If you believe the issue was not resolved and desire to appeal to step two: Request a Step 2 grievance form from a staff member. Attach this completed Step 1 to the Step 2 and any additional documentation and resubmit.			

Bradley Minchey
#126071553
Johnson County Jail
1800 Ridgeman Dr
Cleburne TX 76033 -

INMATE MAIL

Johnson County
Law Enforcement Center

NORTH TEXAS TX P&DC
DALLAS TX 75242
13 MAY 2020 PM 10:27



UNITED States District Court
Office of the clerk
1100 Commerce - Room 1457
Dallas, Texas 75242 -

LEGAL MAIL

75242-131052

